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CONFIRMATION NO. 3770

<b>SERIAL NUMBER</b> 10/756,970	<b>FILING OR 371(c) DATE</b> 01/13/2004 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3733	<b>ATTORNEY DOCKET NO.</b> 4002-3443/PC444.06
<b>APPLICANTS</b> Kevin T. Foley, Germantown, TN; Jeff R. Justis, Gulf Breeze, FL;				
<b>** CONTINUING DATA *****</b> This application is a CON of 09/928,949 08/13/2001 PAT 6,676,665 which claims benefit of 60/224,491 08/11/2000 <i>OK much</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>none much</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 04/15/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>ma</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> TN	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 40
<b>INDEPENDENT CLAIMS</b> 4				
<b>ADDRESS</b> 52196				
<b>TITLE</b> Surgical instrumentation and method for treatment of the spine				
<b>FILING FEE RECEIVED</b> 1216	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	